

PTO/SB/08A (10-01)

Approved for use through 10/31/2002, OMB 0651-0031

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Substitute for form 1449A/PTO

Sheet

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Complete if Known			
Application Number	10/071,739		
Filing Date	02/13/2002		
First Named Inventor	Roy D. Wedge Jr.		
Art Unit			
Examiner Name			
Attorney Docket Number			

		U.S. PATE	NT DOCUMENTS	
Examiner Cite	1 Number Kind Code 2/16 knowed	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	US- 5413,554 US- 5,447,490 US- 5,860,577 US-	०५-०१-1995 ०१-०५-1995 १०-१३-1998	Constance C. Trueman Karen A. Fula Tervance M. Taylor	MAY 13 ZOTA TC 3TOO MAIL ROOM

FOREIGN PATENT DOCUMENTS					
Cite	Foreign Patent Document	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passages	⊤ 6
No. 1	Country Code 3 -Number 4 - Kind Code 5 (# known)	MM-DD-YYYY	Applicant of often document	or Relevant Figures Appear	10
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	Cite No. ¹	Cite Foreign Patent Document	Cite Foreign Patent Document Publication Date	Cite Foreign Patent Document Publication Date Name of Patentee or	Cite Foreign Patent Document Publication Date Name of Patentee or Where Relevant Passages Where Relevant Passages

Examiner	Date Considered	
Signature	OCHOICE T	

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^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.usoto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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Examiner

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary) of Sheet

Complete if Known				
Application Number	10/07/	,739		
Filing Date	02/08	2002		
First Named Inventor	ROY U.	wedge, Jr.		
Group Art Unit				
Examiner Name				
Attorney Docket Number				

	,	OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS		
Examiner Initials	Cite No. 1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T ²	
		Include name of the author (in CAPITAL LETTERS), tille of the article (when appropriate), tille of the item (book, magazine, journal, sorfal, symposium, catalog, etc.), date, page(s), volume-issue number(s) publisher city and/or country where outlished. 2002 Splinting Products Catalog, SMITH + NEPHEW See Finger Flexion Glove P.54 See Rolyan Finger Rehab System P.55 See Deluxe Finger Flexion Glove Post	1001, El Nº	RECENEU

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Date

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¹ Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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	Total Number of Page	es in This Submi	ssion 21	Attorney Docket Number	
	Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/declarati Extension of Time Reques Express Abandonment Re Information Disclosure St Certified Copy of Priority Document(s) Response to Missing Par Incomplete Application Response to Missing under 37 CFR 1.52	equest atement ts/	Assignm (for an A) Drawing Licensin Petition Provision Power of Change Address Termina Reques	nent Papers Application) g(s) ng-related Papers to Convert to a onal Application of Attorney, Revocation of Correspondence	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosurets! (please identify below): Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosurets! (please identify below): Appeal Communication to Board of Appeals and Interferences Appeal Communication to Board of Appeals and Interferences
		SIGNATU	RE OF APPL	CANT, ATTORNEY, OR	AGENT
	Firm or Individual name	Roy D.	Wedg	je, Jr.	

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Complete if Known		
Application Number	10/07/, 739	
Filing Date	02/08/2002	
First Named Inventor	Roy M. Wedge Jr.	
Examiner Name	/ /	
Group Art Unit		
Attorney Docket No.		
	Application Number Fiting Date First Named Inventor Examiner Name Group Art Unit	

METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)					
METHOD OF PAYMENT (check all that apply)					
Check Credit card Money Other None	3. ADDITIONAL FEES				
Deposit Account:	Large Entity Small Entity				
Deposit Account	Fee Fee Fee Fee Fee Description Code (\$)	Fee Paid			
Number	105 130 205 65 Surcharge - late filing fee or oath				
Deposit Account Name	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
The Commissioner is authorized to: (check all that apply)	139 130 139 130 Non-English specification				
Charge fee(s) indicated below Credit any overpayments	147 2,520 147 2,520 For filing a request for ex parte reexamination				
Charge any additional fee(s) during the pendency of this application	112 920° 112 920° Requesting publication of SIR prior to				
Charge fee(s) indicated below, except for the filing fee	Examiner action				
to the above identified deposit account.	113 1,840° 113 1,840° Requesting publication of SIR after Examiner action	<u> </u>			
FEE CALCULATION	115 110 215 55 Extension for reply within first month	1			
1. BASIC FILING FEE Large Entity Small Entity	Ass and the control of the control o	7 9			
Fee Fee Fee Fee Fee Description	117 920 217 460 Extension for reply within third month	अं व			
Code (\$) Code (\$) Fee Paid	118 1,440 218 720 Extension for reply within fourth month	(12,00)			
101 740 201 370 Utility filing fee 106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month				
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal	673			
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal	6			
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing	0.0			
	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$)	140 110 240 55 Petition to revive - unavoidable	-8-			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	141 1,280 241 640 Petition to revive - unintentional	6			
Extra Claims below Fee Paid	142 1,280 242 640 Utility issue fee (or reissue)	- 3 - 3			
Total Claims20** = X =	143 460 243 230 Design issue fee	/30v/			
Claims -3	144 620 244 310 Plant issue fee	<u> </u>			
Multiple Dependent	122 130 122 130 Petitions to the Commissioner	3 6			
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1.17(q)	18000			
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt	100			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))				
104 280 204 140 Multiple dependent claim, if not paid	149 740 249 370 For each additional invention to be	——			
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 "Reissue claims in excess of 20 and over original patent	179 740 279 370 Request for Continued Examination (RCE)				
RIN OACI OHÄNISI KAICIII	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$)	Other fee (specify)				
(-)	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) /8	3000			
**or number previously paid, if greater; For Reissues, see above	institute of poore , mild , or , mil				

SUBMITTED BY		Complete (If applicable)
Name (Print/Type)	Roy D. Wedge, Jr Registration No. (Attorney/Agent)	Telephone 989-832-9711
Signature	Ros Skilledge In	Date 4/26/02

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